

FOREVER FIT

Revised 5/24/04

Crescent Center

MEMBERSHIP APPLICATION AND AGREEMENT

Name: _____ Access Key Fob # _____

Address: _____ City/State/Zip: _____

Home Phone: _____ Cell Phone: _____ Business Phone: _____

Employment: _____

Email Address: _____ Birthday: _____

One Time Initiation Fee.....	\$ 50.00
1 Month (Draft only) Single/Family.....	\$ 49.00 / \$ 75.00
3 Months In Full: Single/Family.....	\$ 44.00 / \$ 70.00 x 3
6 Month In Full: Single/Family.....	\$ 40.00 / \$ 66.00 x 6
1 Year In Full: Single/Family.....	\$ 435.00 / \$745.00
Student Rate:.....	\$ 25.00 / \$260.00

Premium One Year Corporate Rates Available.....Please Inquire

If Family Membership, please list the names of family members
1. _____
2. _____
3. _____

Method of Payment: Visa Mastercard American Express

Credit Card # _____ Exp. _____

Member Signature _____ Date _____

Checking Savings

Bank _____

Routing # _____ Account # _____

Terms and Conditions

Member acknowledges that the use of the equipment and physical exercise related thereto may involve inherent risk of bodily injury or death, and Member having full knowledge of such risk, ASSUMES ALL RISKS by his/her use of the equipment at the Facility. Member represents that he/she is in good physical condition and is not suffering from any physical defect of medical condition that would increase his/her risk of bodily injury or death from use of the equipment of the Facility. **Member hereby expressly releases Forever Fit, Brian Miles, its agents, employees and all independent contractor trainers from any and all liability for any and all injuries and or damages, whatsoever nature or extent, resulting or arising from the use of this Facility.** Member will be permitted to use the Facility 5:30a.m.- 12:00a.m., Sunday thru Saturday. Owner and Manager reserve the right to change the hours when the Facility will be available without prior notice. Furthermore, Owner and Manager shall have the right to revoke the membership of any Member at any time without prior notice. Owner and Manager shall also have the right to change or remove equipment any time without prior notice to Members. In consideration for the privilege of using the Facility, Member agrees to have Forever Fit automatically withdraw the previously agreed monthly amount of \$_____ from his/her bank/credit card account on the first day of the month of _____. **Termination of membership ends upon WRITTEN notification to the club. The issued Security Access Key Fob is the responsibility of the Member and must be returned to Facility by Member upon termination of membership or the Facility will reserve the right to collect \$25.00 for non-return of the Access Key Fob. Upon agreement, signature and date of this contract you have a 3 day right to rescind.**

Member Signature _____ **Date** _____

IN CASE OF EMERGENCY CONTACT: _____ PHONE: _____

PHYSICIAN CONTACT: _____ PHONE: _____